

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J19444

FILED  
Apr 27, 2012  
Secretary of State

**Entity Name:** TROYER BROTHERS FLORIDA, INC.

**Current Principal Place of Business:**

14700 TROYER BROTHERS ROAD  
FT MYERS, FL 33913 US

**New Principal Place of Business:**

**Current Mailing Address:**

14700 TROYER BROTHERS ROAD  
FT MYERS, FL 33913 US

**New Mailing Address:**

**FEI Number:** 59-2682036

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

TROYER, DONALD  
14700 TROYER BROTHERS ROAD  
FT MYERS, FL 33913 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DPT  
Name: TROYER, DONALD  
Address: 14700 TROYER BROTHERS ROAD  
City-St-Zip: FT MYERS, FL 33913 US

Title: DVAS  
Name: TROYER, DAVID  
Address: 14700 TROYER BROTHERS ROAD  
City-St-Zip: FT MYERS, FL 33913 US

Title: DVS  
Name: TROYER, VERNON  
Address: 14700 TROYER BROTHERS ROAD  
City-St-Zip: FT MYERS, FL 33913 US

Title: AS  
Name: BUDD, DAVID G  
Address: 5551 RIDGEWOOD DRIVE, SUITE 501  
City-St-Zip: NAPLES, FL 34108 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DAVID G BUDD

AS

04/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date